

Joslin (B. F.)

POTENCIES

IN CONNECTION WITH

CRUDITIES,

SHOWING WHY SMALL DOSES CAN SUPPLY GREAT DEFICIENCIES,
AND OPERATE WHERE THERE IS NO LACK OF THE MATERIAL,
AND WITHOUT INTERFERENCE FROM MATTER LESS
ATTENUATED.

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New York.

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(Reprinted from the *American Homœopathic Review*.)
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NEW YORK,
SMITHS' HOMŒOPATHIC PHARMACY,
JOHN T. S. SMITH & SONS,
484 Broadway, and 105 Fourth Avenue.
1860

P R E F A C E .

The preceding tracts in this series are those of Drs. Epps and Alley. The first has been wholly, and the second and third in part, published by an American gentleman who is not a physician; but having had his own health benefitted by potentized medicine, selected under the guidance of the homœopathic law, he desires to contribute something to extend the reputation of both among his fellow citizens. The proceeds of the sale will be devoted to a similar publication. Any one who purchases copies for gratuitous distribution will therefore aid the homœopathic cause in a two fold manner, directly by the truth contained in the present number, and indirectly by that in its successor.

B. F. J.

WHY SMALL DOSES CAN SUPPLY GREAT DEFICIENCIES, AND OPERATE WHERE THERE IS NO LACK OF THE MATERIAL, AND WITHOUT INTERFERENCE FROM MATTER LESS ATTENUATED.

To many intelligent persons it appears incredible, that minute doses of our preparations can have any sensible effect in cases where they are of the same chemical nature with elements of our blood, of our food, and even of the water in which the medicine is dissolved and administered.

Now it is a fact established by abundant experience, that each of these substances does evince its specific properties, both by producing a certain set of symptoms in different healthy individuals, and in manifesting a decided curative agency in diseases to which they are appropriate. However we may fail to explain these results, such facts can never be set aside by our inability to give a satisfactory interpretation. Those who have repeatedly felt and observed the effects will believe; those who have not, will require a reason to induce them to subject the matter to the test of experiment.

There are three objections to be answered. First: it is said—if the blood is deficient in iron, as is the case in chlorosis affecting pallid young females with delayed menstruation, how can an infinitesimal supply of iron produce any sensible augmentation of the vastly greater quantity already existing in the blood, even of these chlorotic patients?

This objection originates in a total misconception of the principle on which the medicine appropriate to such cases,

operates. The object of any truly scientific physician, will not be to offer to the system the deficient material, but to enable it to appropriate that which is presented to it in the food; for this malady very rarely arises from any deficiency of iron in the aliment, and never if the nutriment is properly selected. The power of digesting, assimilating and forming the food into blood is defective; and it is this power which is to be restored by medicine. The physician who is ignorant of this, and in treating such a case, regards himself as a mere caterer for supplying materials, will naturally conclude that he must administer ferruginous medicine, and that the medicine must be given at least in quantities appreciable by chemical tests.

Niether of these conclusions has the slightest foundation in reason. The substance which suitably regulates the vital forces in this case, will not necessarily, or even generally, be iron, but some medicine indicated by the generality of the symptoms present. Again the immediate object not being chemical but vital, it is not necessary nor desirable, to employ a dose appreciable to chemical tests, but to the vital test, which is inconceivably more delicate; the living body can be strongly and durably affected by a dilution, which if concentrated a billion fold would not produce a visible change in any lifeless re-agent.

Secondly: if, as above intimated, it is quality and not quantity, that is required to regulate the system, it may be asked, how is it possible for the medicine to operate perceptibly, when the same kind of substance, as salt, iron, &c., is already in the food and in the blood and is sufficient without it?

This objection would be unanswerable were it not founded on a false assumption, viz: that the Hahnemannian preparations have no greater power than other substances called by the same name. The argument is valid only against those who deny that special increase of power called potentization, which the homœopathic medicine receives by minute division in the different stages of its preparation, and which gives it

an efficiency vastly superior to that of the same quantity in the ordinary state.

There are several substances which are always found in the blood and which are nevertheless given with decided effect in various diseases; and even persons in health feel their action when given after their potentization, and in quantities insignificant compared with those already existing in the system. The efficient homœopathic doses are insignificant as compared with the quantitative changes which the same substances, in a crude state in the blood, are daily undergoing without any perceptible effect on the feelings or health of the individual.

Take for example *Natrum muriaticum*, common table salt. The quantity of it taken by almost every man, varies by many grains at his different meals. If he receives a few grains more at one meal than at the preceding one, he has no *Natrum muriaticum* symptoms as the consequence; and common sense would teach a physician that if he should administer a few grains of the crude substance, he could produce no effect by it. The intentional increment must be as inoperative as the accidental. But experience teaches that the potentized form of this medicine, in a quantity inconceivably small, makes a decided impression both on the healthy man and the patient. We are compelled to conclude, that it has a power of affecting the system not perceptible in what is chemically the same substance, in its ordinary state, or in that state in which it exists in the blood, where it is crude as compared with the form in which it is given by homœopathic prescribers. A thousand physicians daily witness the special power of potencies of other medicines, and are thus able to confirm by analogy, the preceding conclusion.

Thirdly: there is an apparent difficulty which may give rise to an objection more profound than either of the preceding ones, and which will be more likely to disturb those minds which have been directed to molecular action and obtained a partial insight into the doctrine of depotentization, for the first time propounded in my paper read before the Institute

in 1858, on the "Effect of impurities in an attenuating liquid.*

I will here endeavour to give a brief and plain statement of what is most applicable to our present subject. I had before shown that every time a dissolved medicine is diluted a hundred fold, it has its minute parts, called molecules, made smaller and more active, i. e. potentized.† In the paper above referred to, it was shown on the other hand, that when a dissolved substance, made a little active by a little division, is brought in contact with the same substance in a still less divided and less active state, it unites with the latter and thus becomes like it comparatively crude and inert—it loses its special power. I call it *depotentized*, being obliged to coin a new word expressive of the new idea. I find that this union by cohesion and consequently this depotentization, always takes place when one portion of the substance is only a hundredth part more diluted than the other. Thus a substance which happens to adulterate the alcohol used for potentizing a medicine, is continually combining with and practically nullifying itself, and the high potency of the medicine remains practically pure. In this case the little parts, molecules, of the impurity never differ much in size and never differ so much in the degree and nature of their activity as to prevent their reunion.

This statement in regard to the conditions of reunion is not a mere hypothesis. It is not only a necessary inference from the facts of potentization but is in accordance with observed facts in crystallization. I have witnessed the crystallization of camphor, as exhibited by the solar microscope, and observed phenomena which have a bearing on this subject. I will only remark here, that no instrument shows the smallest crystals first actually formed; but those first visible were in a series of groups, the larger crystals not growing by the addition of invisible ones, but of those smaller ones already formed of others still smaller. The first visible

* Vide Proceedings of the Fifteenth Annual Meeting, also American Homœopathic Review, Vol. I.

† See my book, entitled "Principles of Homœopathy."

molecules unite with others not too dissimilar in magnitude, frequently after rotating like little magnets; but they do not unite in the first instance with those whose difference of magnitude is immense.

From what has been said, the reader may anticipate the answer to be given to a question which naturally presents itself in relation to our present topic, viz :

Why should not a substance which already exists in the blood, and which is identical in name with the medicine administered, unite with the latter, which would thus become depotentized and inert?

The fact that potencies administered under such circumstances as those dissolved in water rendered impure by the presence of something of the same name, are notwithstanding active, is abundantly established by experience.

That the union of the two, and the consequent depotentization of the medicine does not occur, I attribute to the discrepancy between their degrees of attenuation. The substance in the natural water and the blood, which can be detected by chemical tests, must be crude compared with the same in our medium and higher potencies which cannot be thus detected. The crystalline affinities of these two kinds of molecules, differ so widely, that they may be regarded as on different planes of activity; those in the natural fluid comparatively gross and inert, those in the potency rendered inconceivably minute and active by regular and consecutive attenuations. This activity, so obvious to the physician by the use of the vital test, has not yet attracted the attention of the physicist or chemist, because their tests are not sufficiently delicate. If they were only in possession of the re-agents and implements for prosecuting researches so refined, they would penetrate inconceivably deeper into nature's arcana. The secret laws of crystallization would be unfolded, and atoms be found to unite only with others agreeing with them, within certain limits, both of magnitude and of magnetic activity and habitudes.

I will add, what I strongly suspect, that the equality in the liquid used at each step in our potentizations, is one circum-

stance which contributes to give them greater power than substances carelessly or accidentally and less regularly attenuated, and that some laws of crystallization and magnetism will yet be discovered, to show that the rule in regard to equal proportions which Hahnemann happened to adopt, exerts an influence in giving his several dilutions a character not only different from each other, but from all other substances in nature, even those, if any exist on our globe, which are equally attenuated.

Principles similar to those above applied to cohesion and crystallization, apply also to chemical affinity. Our potentized medicines are not liable to be decomposed by any substances which they meet with in the water which dissolves them, in the stomach which receives them, or in the blood in which they are finally distributed. Their minute division places them beyond the reach of the chemical affinities of all substances vastly cruder and not similarly prepared. If the medicine is nitrate of silver, it passes unharmed through the common salt of the stomach and of the blood and produces its legitimate effects in spite of the presence of this abundance of muriate of soda which would instantly decompose it and render it comparatively inert, if applied to it in its ordinary state of crude nitrate of silver or lunar caustic.*

We have a remarkable exemplification of the same principle in phosphorus. Exposed in its ordinary state to the air, it seizes with avidity upon the atmospheric oxygen, and is converted into phosphoric acid. This is a different substance; its action upon the human body produces symptoms unlike those of phosphorus. But what is the consequence of exposing a potency, a minutely, successively and regularly divided preparation, of phosphorus, the same highly combustible substance? It has no longer the property of oxidizing in the air. It is only during the first stages in the preparation of the dilutions of phosphorus, while it is yet somewhat crude, that any precautions are necessary for excluding the atmos-

* I avoid the use of the term chloride of sodium, for reasons given in an article on "Ozone," *Vide American Homœopathic Review*, Vol. I.

phoric oxygen. Afterwards when more attenuated it is not convertible into phosphoric acid. If it were thus changed the transformation would be easily detected by the vital test; it would produce a different set of symptoms, and no longer act favorably in the diseases to which phosphorus is specially adapted. No duration of exposure occasions such deterioration; we can keep it for many years in the form of liquids or pellets with frequently renewed air above it in the vials, and still find by reliable trials that its action is that of phosphorus and not phosphoric acid.

The facts and principles stated in this paper justify the conclusion, that potentization changes not only vital but physical and chemical properties, that attenuated medicines are susceptible of transmission through cruder matter, unharmed by the cohesive power of that which identical in name or the affinity of that which has been supposed chemically incompatible, and that the presence of these in the blood, the food, the water or the atmosphere, is in no danger of interfering with the action of delicate homœopathic preparations.

I will add, that nothing above said favors the mixing of different medicines in one prescription; each will act, though in an unknown and hence unsafe manner. Their separate proving shows nothing in regard to their joint action. Hence a glass which has been used for one solution should be rinsed with hot water, wiped when hot and allowed to stand till cold before a different medicine is dissolved in it. Mere washing makes only a kind of imperfect higher dilution, which adulterates the next solution if the glass is immediately used for a different medicine. If the glass is left till cold, the adherent pellicle of water will have evaporated and carried with it the attenuated medicine which it held in solution.

